

Filing Fee \$80.00

**DOMESTIC
LIMITED LIABILITY COMPANY**

STATE OF MAINE

**RESTATED ARTICLES OF
ORGANIZATION OF
LIMITED LIABILITY COMPANY**

(Name of Limited Liability Company
as it appears on the record of the Secretary of State)

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to 31 MRSA §623.6., the undersigned adopt(s) the following restated articles of organization of limited liability **company**:

FIRST: The name of the limited liability company has been changed to (if no change, so indicate)

(The name must contain one of the following: "Limited Liability Company", "L.L.C." or "LLC"; §603.1.A.)

SECOND: The date of filing of the initial articles of limited liability company was _____ and the name
under which it was originally filed is _____

THIRD: The name of the Registered Agent, an individual Maine resident or a corporation, foreign or domestic, authorized to
do business or carry on activities in Maine, and the address of the registered office are

(name)

(physical location - street (not P.O. Box), city, state and zip code)

(mailing address if different from above)

FOURTH: The management of the limited liability company has been changed (if no change, so indicate _____). If
changed, "X" one box only.

☐ A. The management of the company is vested in a member or members.

☐ B. The management of the company is vested in a manager or managers. The minimum number shall be _____
managers and the maximum number shall be _____ managers.

FIFTH: Other provisions of these restated articles, if any, that the members determine to include are set forth in Exhibit _____
attached hereto and made a part hereof.

MANAGER(S)/MEMBER(S)*

DATED _____

(signature)

(type or print name and capacity)

(signature)

(type or print name and capacity)

(signature)

(type or print name and capacity)

For Manager(s)/Member(s) which are Entities

Name of Entity _____

By _____
(authorized signature)

(type or print name and capacity)

Name of Entity _____

By _____
(authorized signature)

(type or print name and capacity)

Name of Entity _____

By _____
(authorized signature)

(type or print name and capacity)

(Complete next section ONLY if agent has changed.)

THE FOLLOWING MUST BE COMPLETED BY THE REGISTERED AGENT (§607.2.).

The undersigned hereby accepts the appointment as registered agent for the above named limited liability company.

REGISTERED AGENT

DATED _____

(signature)

(type or print name)

For Registered Agent which is a Corporation

Name of Corporation _____

By _____
(authorized signature)

(type or print name and capacity)

*Restated articles **MUST** be signed by

- (1) at least one **manager** OR
- (2) at least one **member** if the limited liability company is managed by the **members** OR
- (3) any duly authorized person.

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under Title 17-A, **section** 453.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**